PTO/SB17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE
UnderthePaperworkReductionActof1995nopersonsarerequiredtorespondtoacollectionofinformationunlesstidisplaysavalidOMBcontrolnumber.

Fees pursuant to the Co	Complete if Known									
<u></u>	Application Numb	er 10/5	10/566,393							
FEE '	Filing Date	Janı	January 27, 2006							
f	First Named Inve	rst Named Inventor Junbiao Zhang								
Applicant claims	Examiner Name Jing F. Sims									
TOTAL AMOUNT OF PAYMENT		(\$) O		Art Unit 2437						
				Attorney Docket No. PU030228						
METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER 24498										
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :										
☑ Deposit Account Deposit Account Number: 07-0832 Deposit Account Name: THOMSON LICENSING LLC										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s)										
Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
information and authorization on PTO-2038. FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES										
		Small Ent	<u>ity</u>	Small I	_		<u>Small</u>	Entity		
Application Typ				<u>e(\$)</u>	<u>\$)</u>	<u>Fee(\$)</u>		<u>e(\$)</u>	Fees Paid (\$)	
Utility	310	155	51			210	105			
Design	210	105	10			130	65			
Plant	210	105	31			160	216			
Reissue Provisional	310 210	155 105	51	$ \begin{array}{ccc} 0 & 255 \\ 0 & 0 \end{array} $		620 0	310			
	0		U	,	,	Compliantitus				
2. EXCESS CLAIM FEES Small Entity For (th)										
Fee Description Each claim over 20 (including Reissues)								ee (\$) 50	<u>Fee (\$)</u> 25	
Each independent					10	105				
Multiple depender					70	185				
Total Claims <u>Extra Claims</u> <u>Fee(\$)</u>				Fee Paid (\$)				<i>l</i> lultiple	Dependent Claims	
20 o	r HP=	x		=				Fee (\$	<u>Fee Paid (\$)</u>	
HP = highest num			er than 20.							
<u>Indep. Claims</u>	·	<u>Claims</u>	<u>Fee(\$)</u>	Fee Paid (\$)					
3 or		x		=						
HP = highest num	•	nt claims paid for	r, if greater than	3.						
3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>										
100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): Fees for Notice of Appeal and Appeal Brief were previously paid (6/24/09) \$0										
CHIPMITTED DV										
SUBMITTED BY	1			I				Telanhon		
Signature	re /Daniel E. Sragow			Registration No. (Attorney/Agent) 22,856				Telephone (609) 734-6832		
Name (Print/Type)	-							Date 021		